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STATE OF SOUTH CAROLINA (Caption of Case) Example: Application for a Class C Charter Certificate from John Doe dba Doe's Limo	BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
1	TRANSPORTATION COVER SHEET
Haas Reas, Inc. dba Lowcountry Trolley)	DOCKET NUMBER: 2018 - 115 -T
(Please type or print)Anne and Roger Stewart	If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.
Submitted by:	Telephone: 843-300-7618
Address: 718 Eighty Oak Ave	Fax:
Mount Pleasant, SC 29464	Other:
NOTE: The cover sheet and information contained herein neither replace	Email: roger@lowcountrytrolley.com
as required by law. This form is required for use by the Public Service (be filled out completely. NATURE OF ACTION	
Application - Class A/A Restricted	Request for Name Change on Certificate
Application - Class C Taxi	Request to Amend Scope of Authority
Application - Class C Charter Application - Class C Charter Bus Application - Class C Non-Emergency Application - Class C Stretcher Van	Request to Amend Tariff (rate increase, etc.)
Application - Class C Charter Bus	Request to Amend Passenger Limit
Application - Class C Non-Emergency 2018	Request
TERK'S OFF	Exhibit
Application - Class E Household Goods	Late-Filed Exhibit
Application - Class E Hazardous Waste	Letter
Application	Proposed Order
Request for Extension to Comply with Order	Publisher's Affidavit
Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded	Reservation Letter
Request for Cancellation of Certificate	Response
Request for Suspension	Return to Petition
Request for Reinstatement	Other:
the state of the s	

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.



PAGE

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210

Phone: (803) 896-5100

Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

	Date: April 4, 2018	
C	LASS C - CHARTER	
A] of	pplication is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the prof. S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.	vision
1.	Haas Raas,Inc. dba Lowcountry Trolley	}
7	Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trad-	e name.
	718 Eighty Oak Ave, Mount Pleasant, SC 29464	
	Street Address of Applicant	
_	1985 Riviera Drive, Suite #103-182, Mount Pleasant, SC 29464 Mailing Address of Applicant (if different from street address)	
	, and the second se	
	843-300-7618 Phone Fax	
-	roger@lowcountrytrolley.com Email Address	
	If the Applicant is an LLC or a corporation, a copy of the Certificate of Existence from the South Carolina Secretary of State and the Articles of Incorporation must be attached. (If incorporated outside of SC, attach Carolina Secretary of State "Foreign Corporation" Certificate.)	South
ŧ.	Select Entity Type: (Check one)	
'	☐ Individual Owner/Sole Proprietorship	-
	Partnership - List names and addresses of all person having an interest in the business.	
	□ Corporation - List names and addresses of two principal officers.	
	Anne Stewart - President: 718 Eighty Oak Ave, Mount Pleasant, SC 29464	
	Roger Stewart - Sec/Treas: 718 Eighty Oak Ave, Mount Pleasant, SC 29464	<u> </u>

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Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

Financial Statement

Applicant's assets and liabilities are as follows:

Assets:		<u>Liabilities:</u>		[
Value of Real Estate		Mortgage/Loan on Real Estate			_
Value of Motor Vehicles	\$105,750	Loans Owed on Motor Vehicles			
Cash on Hand		Business/Other Loans Owed	\$137,375		
Cash in Bank	\$2,042	Other Liabilities or Debts	\$19,601		
Value of Other Assets and Equipment	\$166,699	Total Liabilities	4156,976	/]
Total Assets	4274.491				

INSTRUCTIONS:

- "Value of Real Estate" means the actual or estimated market value of any real property/buildings owned by the Company/Business Applying for a Certificate.
- "Mortgage/Loan on Real Estate" means the outstanding balance on any Mortgage, Equity Line or other Loan secured by the Real Estate listed in Item 1.
- 3. "Value of Motor Vehicles" means the actual or fair estimated value of any moving vans, trucks or other vehicles owned by the Company/Business Applying for a Certificate.
- 4. "Loans Owed on Motor Vehicles" means the outstanding balance on any loans or liens on the vehicles listed in Item 3.
- 5. "Cash on Hand" is the total of actual cash held by the Company/Business applying for a Certificate on the day this form is filled out.
- 6. "Business/Other Loans Owed" means the outstanding balance on any small business loan or other unsecured loan made by a person, bank or business to the Business/Company applying for a Certificate.
- 7. "Cash in Bank" means the current balance in checking accounts, savings accounts or the like in the name of the Company/Business applying for a Certificate. Do not include retirement accounts or personal bank account balances.
- 8. "Value of Other Assets and Equipment" should include the actual or estimated value of items such as office equipment (computers/furnishings), moving equipment (hand trucks/blankets/strapping), and trailers.
- 9. "Other Liabilities or Debts" means specific amounts/balances which the Company/Business applying for a Cortificate knows that it owes to other persons or companies; for example Franchise Fees. This does NOT include regular bills such as electricity bills, security system costs, insurance, salaries, etc.

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PROPOSED RATES AND CHARGES FOR SERVICE

Proposed Rates and Charges:

- 1- Hour @ \$210.00
- 3- Hours @ \$575.00
- 4 Hours @ \$700.00 plus each additional hour \$175

Requested Scope of Authority: Check all counties in which you are requesting permissio	n to operate
You will only be allowed to operate in those counties checked below. You may request "	Statewide"
authority if you intend to operate in all counties in South Carolina.	}

				Y
Abbeville	Cherokee	Florence	Lee	Saluda
Aīken	Chester	Georgetown	Lexington	Spartanburg
Allendale	Chesterfield	Greenville	Marion	Sumter
Anderson	Clarendon	Greenwood	Marlboro Marlboro	Union
Bamberg	Colleton	Hampton	McCormick	Williamsburg
Banwell	☐ Darlington	∐ Ноπу	Newberry	☐ York
Beaufort	Dillon	Jasper	Oconee	-
Berkeley	∑ Dorchester	Kershaw	Orangeburg	Statewide
Calhoun	Edgefield	Lancaster	Pickens	
	Fairfield	Laurens	Richland	

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DESCRIPTION OF EQUIPMENT

You are not required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

Maximum Number of Passengers Vehicle is Equipped to Carry: (The number of passengers a vehicle is equipped to carry is based on the number of seathelts in the vehicle, including the driver's seathelt.)

	-7	Passengers,	including	driver
--	----	-------------	-----------	--------

8-15 Passengers, including driver

MAKE	YEAR & MODEL	VIN#	EMPTY WEIGHT
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INSURANCE QUOTE

This form	MUST	BE CO	MPL	ETED.
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The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested. You will not be required to purchase insurance until your application has been approved and an order has been issued by the PSC. THIS IS ONLY A QUOTE.

The following insurance quo	ote is for:	
	Haas Raas, Inc. dba Lowcountry Trolley	
	Name of Applicant	-
	718 Eighty Oak Drive, Mount Pleasant, SC 29464	
	Address of Applicant	
Amount of Premium:	Limits Onoted: (See Below)	
Liability Insurance \$ 1,00	00,000 Limits \$25,000/\$300,000/\$25.000	
The above quoted premium	is for a term of 12 months.	
Minimum Limits - Intrasta	te Only:	•
1-7 Passengers* 8-15 Passengers*	in abrillian at a different party.	
	Columbia Insurance Company	•
	Name of Insurance Company	
131	4 Douglas Street, Suite 1400, Omaha, NE 68102-1944	:
•	Home Office Address of Company	

I, the Applicant, am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

NOTICE:

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact the Department of Motor Vehicles at (803) 896-8457 or (803) 896-9903.

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tax, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at www.wcc.state.sc.us/self-insurance.

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Exhibit Fit, Willing, and Able (FWA)

Haas Raas, Inc. dba Lowcountry Trolley

Name of Applicant

- 1. Are there currently any outstanding judgments against the Applicant?
 - O Yes
- No

If Yes, list judgements here:

- 2. Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?
 - Yes
- O No
- 3. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?
 - Yes
- O No

ACCEPTED FOR PROCESSING - 2018 April 5 10:29 AM - SCPSC - 2018-115-T - Page 8 of 12

Exhibit on Driver Qualifications

1	. Appı	icant understands that	all (rivers must be a minimum of 18 years of age.	,
	•	Yes	0	No	:
					i i
2	and 8	icant understands that uch record from the D aintained in the Applic	MΝ	tified copy of the driver's three (3) year driving record issued by the SC DM of the state in which the driver is or has been domiciled for such period must business office.	[V t
	•	Yes	0	No	<u> </u>
					!
3.	Appli must	cant understands that be maintained in the A	a cri Appli	ninal history background check from the state where the driver currently liv	es
	•	Yes	0	No	
4.	their p	cant understands that cossession when operated of residence of the driver	nting	ivers operating a vehicle under a Class C Certificate must have in a charter vehicle, a valid driver's license issued by the SC DMV or the curre	nt
	•	Yes	0	No :	
٠					
5.	venici	es to drivers who are i	regis	ass C Certificate holders are prohibited from employing or leasing cred, or required to be registered, as sex offenders with the South Carolina or any national registry of sex offenders.	
	•	Yes	0	No	
		•		- -	

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PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 EXECUTIVE CENTER DRIVE, SUITE 100 COLUMBIA, SOUTH CAROLINA 29210

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 2, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

S.C. Code Ann. Section 58-3-250 states, in part, that every final order of the Commission must be served by electronic service, registered or certified mail, upon the parties to the proceeding or their attorneys.

Please check the applicable box:

The Applicant AGREES to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System. The Applicant authorizes the Commission to serve its orders by using the email address as it appears on page one of this Application. To sign up for eService notifications, please visit www.psc.sc. gov to create a My DMS account.

The Applicant DOES NOT AGREE to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System.

The Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Roger D. Stewart, Sec/Treas

Title of Applicant (e.g. President, Owner, etc.)

STATE OF SOUTH CAROLINA

COUNTY OF Greenwood

SWORN TO BEFORE ME

day of April

Commission Expires 01-13-203

KATHRYN C. MUNDY **NOTARY PUBLIC EXPIRES JAN. 13, 2027**

Print Application

04/04/2018 8438490517

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

HAAS RAAS, INC.,

a corporation duly organized under the laws of the State of South Carolina on February 1st, 2016, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the corporation that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-14-210, and that the corporation has not filed articles of dissolution as of the date hereof.

> Given under my Hand and the Great Seal of the State of South Carolina this 28th day of March, 2018,

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STATE OF SOUTH CAROLINA SECRETARY OF STATE

ARTICLES OF INCORPORATION

TYPE OR PRINT CLEARLY IN BLACK INK

1.	The name of	of the proposed corporation is: HAAS RAAS, Inc.					
2.	The initial re						
		753 Johnnie Dodds Boulevard, Suite 100					
	Mt Dlaggart		et Address				
	Mt. Pleasant City		South Carolina	29464			
	City	County	State	Zīp Code			
	and the initia	l registered agent as such		Kevin Crain nt Name			
	I hereby	I hereby consent to the appointment as registered agent of the corporation:					
		() ///	Λ .	-			
		1 / Louis					
			Creen				
		Agent's Si	Snaprico				
3.	The corporation is authorized to issue shares of stock as follows. Complete "b", whichever is applicable:						
	a. [XX] The corporation is authorized to issue a single class of shares total number of shares authorized is: 100,000						
	ъ́. []	horized to issue more	than one class of				
		Class of Shares	Authorized No. of	Each Class			
	The relative reach series wi	ight, preference, and limi thin a class, are as follows	tations of the shares of	each class, and of			
		N/A					
'•	Secretary of S	e of the corporation shatate unless a delayed date tate unless a delayed date a Carolina Code of Laws,	is indicated. (See Sect	ing date with the ion 33-1-230(b) of on Filing.			

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				HAAS RAAS, Inc. Name of Corporation
5	i:	ucorporation, are a	sions, which the corporation elects to as follows. (See the applicable prov d 35-2-221 of the 1976 South Care	visions of Sections 22.2
			N/A	
6.	. I	he name, address, equired.)	as follows. (Only one is	
	a	Name Address	Roger Stewart 471 Belinda Parkway Mt. Juliet, TN 37122	
		Signature	Roger Stewart	
7.	ce	outh Carolina, certi rtificate is attache	in, an attorney licensed to pify that the corporation, to whose article, has complied with the requirement carolina Code of Laws, as amended, r	cles of incorporation this its of Chapter 2. Title 33

incorporation.

Date: 1/29/16

V. Kevin Crain CRAIN LAW FIRM, PC 636 Long Point Road #G95 Mt. Pleasant, SC 29464 Phone (843) 735-7602 Fax (888) 735-4067 Mobile (843) 327-7744

Email kevin@kevincrain.com